



Department of Development Services
205 Lawrence Street
Marietta, Georgia 30060
Brian Binzer, AICP, Director

APPLICATION FOR SPECIAL LAND USE PERMIT
(Owner/Applicant/or Representative must be present at all public hearings)

Application #: _____ Hearing: _____ Legistar # _____

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Board of Zoning Appeals

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City Council

Owner's Name _____

Address _____ Zip Code: _____

Telephone Number: _____ Email Address: _____

COMPLETE ONLY IF APPLICANT IS NOT OWNER:

Applicant: _____

Address _____ Zip Code: _____

Telephone Number _____ Email Address: _____

Address of property for which special land use is requested:

_____ Date of Acquisition: _____

Land Lot (s) _____ District _____ Parcel _____ Acreage _____ Zoned _____ Ward _____ FLU _____

List the special land use permit requested (please attach any additional information):

Required Information

1. Application fee: Board of Zoning Appeals (\$250) or Planning Commission/City Council (\$500)
2. Completed notarized application. **The original application must be submitted with ALL original signatures – Copies of the application or signature(s) will NOT be accepted.**
3. Legal description of property. **Legal description must be in a WORD DOCUMENT.**
4. Site plan - 25 copies of site plan drawn to scale. Site plans must illustrate property lines and all relevant existing information and conditions in addition to proposed additions or modifications within the referenced property lines of the tract(s).
5. Copy of current tax bill showing payment or documentation certified by the City of Marietta Tax Office.
6. Documentation authorizing applicant to submit application by property owners if applicant is not owner.

Note: The Department of Development Services reserves the right to obtain additional information that reasonably may be required in order that an informed decision may be made.

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CAMPAIGN CONTRIBUTIONS

The Owner and Applicant herein certify that he/she (has) (has not) made campaign contributions or gifts aggregating \$250.00 or more to the Mayor, any member of Council, Planning Commission, or Board of Zoning Appeals within the two (2) years preceding the filing of the this application.

Signature of Owner

Signature of Applicant

Print Name

Print Name

FINANCIAL INTEREST

The Applicant herein certifies that he/she (has) (has not) a financial interest in the property which is ten percent (10%) or more.

Print Name

Signature of Applicant

OWNER/APPLICANT CERTIFICATION

- The Owner/Applicant certifies that all information in this application, and all information furnished in support of this application, is true and complete to the best of the Applicant's knowledge and belief. Should any portion not be true, then the application may be rejected.
- Penalty for false or fraudulent statement: Whoever, in any matter, knowingly and willingly falsifies or makes any false, fictitious or fraudulent statement of representatives concerning this application shall be denied the request stated in this application.
- The Owner/Applicant hereby gives permission to enter on the property for inspection during the time application is pending.

Signature

Please Print

Address

Date

Signed, sealed and delivered in the presence of:

My Commission Expires:_____